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(Depositor's mane (Simptore 30-0 (Date APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. Stephen C. Evans

11/26/2003 TITLE OF INVENTION: NETWORK COMPONENT IDENTIFICATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	S1510	08/18/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS	1			
LIM. KRISNA		2453	709-220000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353). Change of correspondence address (or Change of Correspondence Address form FTO-SFI2-2) attached. "Fee Address" indication (or "Fee Address" Indication form FTO-SFI4-7; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2	Kivlin, Kowert & Gootzel, P.C.	
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02. or more recent) attached. Use of a Customer			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2 p to e is 3	3	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sun Microsystems, Inc.

10/724,020

Santa Clara, CA

Please check the appropriate assignee category or categories (will not	be printed on the patent): 🗖 Individual 📓 Corporation or other private group entity 🗖 Government
4a. The following fec(s) are submitted: Silestue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies	4b. Payment of Pec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit end. Form PTO-2038 is attached. The Director is hereby authorized to charge the goguined fee(s), any deficiency, or credit any overspownent, to Depoid Account Number 2015050. (solid colored as extra copy of this form)

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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6-30-09 Authorized Signature _ B. Noel Kivlin 33929 Registration No. Typed or printed name _

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